

Enter the name of the county in which you are filing this case.	STATE OF WISCONSIN, CIRCUIT COURT, _____ COUNTY	
Enter the Plaintiff's name and address.	Plaintiff(s) (Name and Address): <hr/> <div style="display: flex; justify-content: space-between; font-size: small;"> First name Middle name Last name </div> <hr/> <div style="text-align: center;">Address</div> <hr/> <div style="text-align: center;">Address</div> <hr/> <div style="display: flex; justify-content: space-between; font-size: small;"> City State Zip </div>	Small Claims Publication Summons And Notice Case No. _____
If there is more than one plaintiff, check the "additional plaintiffs" box and attach another sheet with their names and addresses. Enter the case number.	<input type="checkbox"/> See attached for additional plaintiffs. -VS-	
Enter the Defendant's name and address.	Defendant(s) (Name and Address): <hr/> <div style="display: flex; justify-content: space-between; font-size: small;"> First name Middle name Last name </div> <hr/> <div style="text-align: center;">Address</div> <hr/> <div style="text-align: center;">Address</div> <hr/> <div style="display: flex; justify-content: space-between; font-size: small;"> City State Zip </div>	
If there is more than one defendant, check the "additional defendants" box and attach another sheet with their names and addresses.	<input type="checkbox"/> See attached for additional defendants.	

If you require reasonable accommodations due to a disability to participate in the court process, please call _____ at least 10 working days prior to the scheduled court date. Please note that the court does not provide transportation.

Publication Summons and Notice of Filing

TO THE PERSON(S) NAMED ABOVE AS DEFENDANT(S):

You are being sued by the person(s) named above as Plaintiff(s). A copy of the claim has been sent to you at your address as stated in the caption above.

The lawsuit will be heard in the following Small Claims court:

_____ County

Courthouse Telephone Number of Clerk of Court: _____

Courtroom/Room Number: _____

Address: _____

Address: _____

City: _____ State _____ Zip _____

on the following date and time:

Date: _____ Time: _____ ☐ a.m. ☐ p.m.

If you do not attend the hearing, the court may enter a judgment against you in favor of the person(s) suing you. A copy of the claim has been sent to you at your address as stated in the caption above. A judgment may be enforced as provided by law. A judgment awarding money may become a lien against any real estate you own now or in the future, and may also be enforced by garnishment or seizure of property.

You may have the option to Answer without appearing in court on the court date by filing a written Answer with the clerk of court **before** the court date. You must send a copy of your Answer to the Plaintiff(s) named above at their address. You may contact the clerk of court at the telephone number above to determine if there are other methods to answer a Small Claims complaint in that county.

Sign here. Enter your phone number and date. Leave the Attorney's State Bar Number box blank.	Signature of Plaintiff/Attorney	Date	Law Firm and Address
	Plaintiff's/Attorney's Telephone Number	Attorney's State Bar Number	

Notice to Printers: Do not print the instructional text in the boxes along the left-hand column when publishing this summons. Print bolded text in bold typeface.